PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1067/072

1/00//											0,70	
		CLAIMS AS	PART I 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS		10				F	RATE	FEE		RATE	FEE
FO	R		NUMBER	FILED	NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS $/\mathcal{O}_{l}$				us 20=	* -	_	,	(\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	/ mi	nus 3 =	* -		;	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in co						olumn 2		OTAL		OR	TOTAL	712
CLAIMS AS AMENDED - PART II								•			OTHER	THAN
			(Column 2) (Column 3)				MALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	** }	<u> </u>	40,		(\$ 9=		OR	X\$18=	
AME	Independent	* (Minus ### 3) ·	-6)	(42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=		OR	+280=	
								TOTAL		OR	TOTAL	
		OIT. FEE		JO. 1	ADDIT. FEE							
_		(Column 1) CLAIMS		(Colur		(Column 3)	, –				· · · · · · · · · · · · · · · · · · ·	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=]	(\$ 9=		OR	X\$18=	
	Independent * FIRST PRESENTATION OF M		Minus *** JLTIPLE DEPENDENT		CLAIM 🗍		↓ [}	(42≃		OR	X84=	
_	7.11.01.11.12.02		JEN LE DEI	LITOLITI	OWAIN		1	140=		OR	+280=	٠
								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	_
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	_	=] [×	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		(42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	nber Previously Pa	id For (Total o	r Independ	ent) is the	highest numb	er found i	in the app	propriate box	in col	lumn 1.	